## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10705679

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |              |   |                | mn 2)            | SMALL ENTITY TYPE    |                        | OR  | OTHER THAN R SMALL ENTITY |                        |
|---|--|---|--------------|---|----------------|------------------|----------------------|------------------------|-----|---------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 35           |   |                |                  | RATE                 | ~FEE                   | ] [ | RATE                      | FEE                    |
| FOR   |  |   | NUMBER FILED |   | NUMBER EXTRA   |                  | BASIC FEE            | 385.00                 | OR  | BASIC FEE                 | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 35 min       | us 20=                                      | . 15           |                  | X\$ 9=               | 135                    | OR  | X\$18=                    |                        |
| INDEPENDENT CLAIMS  |  |   | 6 mir        | nus 3 =                                     | * 3            |                  | X43=                 |                        | OR  | X86≈                      |                        |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PF                               | RESENT       |   |                |                  | +145=                |                        | OR  | +290=                     | r                      |
| * If  | the difference                                 | in column 1 is l                            | less than ze | ero. enter "0" in column 2                  |                |                  | TOTAL                | 520                    | OR  | TOTAL                     |                        |
| CLAIMS AS AMENDED - PART II   |  |   |              |   |                |                  | OTHER THAN           |                        |     |                           |                        |
| (Column 1)  |  |   |              | (Columr                                     |                | (Column 3)       | SMALL                |                        | OR  | SWALL                     |                        |
| NT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | HIGH<br>NUMI<br>PREVIO<br>PAID              | BER<br>DUSLY   | PRESENT<br>EXTRA | RATE                 | ADDI-<br>TIONAL<br>FEE |     | RATE                      | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total  | *   | Minus        | **  |                | =                | X\$ 9=               |                        | OR  | X\$18=                    |                        |
| ME  | Independent                                    | *   | Minus        | ***   |                | =                | X43=                 |                        | OR  | X86=                      |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |   |                |                  | +145=                |                        | OR  | +290=                     |                        |
|   |  |   |              |   |                |                  | TOTAL                |                        | -   | TOTAL                     |                        |
|   |  |   | ADDIT. FEE   | L   | 1 <sub>0</sub> | ADDIT. FEE       |                      |                        |     |                           |                        |
|   |  | (Column 1)                                  | ·            | (Colu                                       |                | (Column 3)       |                      |                        | 3   |                           |                        |
| AMENDMENT B   | ·  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |                | PRESENT<br>EXTRA | RATE                 | ADDI-<br>TIONAL<br>FEE |     | RATE                      | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **  |                | =                | XS 9=                |                        | OR  | X\$18=                    |                        |
|   | Independent                                    | *   | Minus        | ***   |                | =                | X43=                 |                        | OR  | X86=                      |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |   |                |                  |                      |                        | 1   | +290=                     |                        |
|   |  |   |              |   |                |                  | +145=.               |                        | OR  | TOTAL                     | <del> </del>           |
|   |  |   |              |   |                |                  | TOTAL<br>ADDIT. FEE. |                        | OR  | ADDIT. FEE                |                        |
|   |  | (Column 3)                                  |              |   |                |                  |                      |                        |     |                           |                        |
| AMENDMENT C   |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |              | PREVI                                       |                | PRESENT<br>EXTRA | RATE                 | ADDI-<br>TIONAL<br>FEE |     | RATE                      | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **  |                | =                | X\$ 9=               |                        | OR  | X\$18=                    |                        |
| MEN   | Independent                                    | *   | Minus        | ***   |                | =                | X43=                 | <del></del>            | OR  | X86=                      |                        |
| 4   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |   |                |                  | -                    |                        | 1   |                           | 1                      |
| +145=   |  |   |              |   |                |                  |                      |                        | OR  | +290=                     |                        |
| <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> <li>ADDIT. FEE</li> </ul> |  |   |              |   |                |                  |                      |                        | OR  | TOTAL<br>ADDIT. FEE       |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.    |  |   |              |   |                |                  |                      |                        |     |                           |                        |